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01/11/01

UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.	26592.109.US
	First Named Inventor or Application Identifier	Thomas Anderson et al.
	Title	System and Method for Determining and Implementing Best Practice In A Distributed Workforce
	Express Mail Label No.	

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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- | | |
|---|---|
| 1. <input type="checkbox"/> *Fee Transmittal Form (Form PTO-1082)
(Submit an original and a duplicate for fee processing) | 6. <input type="checkbox"/> Microfiche Computer Program (Appendix) |
| 2. <input checked="" type="checkbox"/> Specification [Total Pages 64]
(preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R&D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claims- Abstract of the Disclosure | 7. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies |
| <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 7]
Oath or Declaration [Total Pages] <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
[Note Box 5 below]i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named
in the prior application, see 37 CFR 1.63(d)(2) and
1.33(b). | |

ACCOMPANYING APPLICATION PARTS

- | | |
|---|--|
| 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | |
| 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) | <input type="checkbox"/> Power of Attorney |
| 10. <input type="checkbox"/> English Translation Document (if applicable) | |
| 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 | <input type="checkbox"/> Copies of IDS Citations |
| 12. <input type="checkbox"/> Preliminary Amendment | |
| 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Two)
(should be specifically itemized) | |
| 14. <input type="checkbox"/> *Small Entity Statement(s) | <input type="checkbox"/> Statement filed in prior application, Status still proper and desired |
| 15. <input type="checkbox"/> Certified Copy of Priority Document(s)
(if foreign priority is claimed) | |
| 16. <input type="checkbox"/> Other: | |

*NOTE FOR ITEMS 1 & 14 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 CFR § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 CFR § 1.28)


17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: /

Prior Application Information: Examiner: Group/Art Unit:

18. CORRESPONDENCE ADDRESS

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Name (Print/Type)	Paul J. Berman	Registration No. (Attorney/Agent)	36,744		
Signature				Date	January 11, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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January 11, 2001

Box Patent Application

Commissioner for Patents
Washington, D.C. 20231

Re: U.S. Non-Provisional Utility Patent Application
Appl. No.: To be assigned; Filed: January 11, 2001
For: **System and Method for Determining and
Implementing Best Practice In A Distributed Workforce**
Inventors: Thomas ANDERSON; Andreas BEROUTSOS;
Kevin BRADICICH; Nathaniel FOOTE; Jonathan HARRIS;
Brian HANESSIAN; Quentin HOPE; Bill JOINER;
Brian KANNER; DAVID KRAWITZ; John LUCAS;
Simon MENDELSON; Michael PRITULA; Nick RUDD;
Nancy SCHMITT; Ellen SHUMWAY; Laurence SMITH;
Nancy TAUBENSLAG; John WILCOX; and
Kristina WOLLSCHLAEGER
Our Ref.: 26592.109.US

Sir:

The following documents are forwarded herewith for appropriate action by the U.S.
Patent and Trademark Office:

1. U.S. Utility Patent Application entitled:

System and Method for Determining and Implementing Best Practice in A Distributed Workforce

and naming as inventor(s):

Thomas ANDERSON; Andreas BEROUTSOS; Kevin BRADICICH;
Nathaniel FOOTE; Jonathan HARRIS; Brian HANESSIAN; Quentin HOPE;
Bill JOINER; Brian KANNER; DAVID KRAWITZ; John LUCAS;
Simon MENDELSON; Michael PRITULA; Nick RUDD; Nancy SCHMITT;
Ellen SHUMWAY; Laurence SMITH; Nancy TAUBENSLAG;
John WILCOX; and Kristina WOLLSCHLAEGER

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Commissioner for Patents
January 11, 2001
Page 2



the application comprising:

- a. A specification containing:
 - (i) 41 pages of description prior to the claims;
 - (ii) 22 pages of claims (63 claims);
 - (iii) a one (1) page abstract;
 - b. 7 sheets of drawings: (Figures 1-7); and
2. Two (2) return postcards.

It is respectfully requested that, of the two attached postcards, one be stamped with the filing date of these documents and returned to our courier, and the other, prepaid postcard, be stamped with the filing date and unofficial application number and returned as soon as possible.

This patent application is being submitted under 37 C.F.R. § 1.53(b) without Declaration and without filing fee.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Paul J. Berman". The signature is stylized with a large, looping initial "P".

Paul J. Berman (Reg. No. 36,744)

Enclosures

09/57700-01101